ALBERTA REFRIGERATION BENEFIT OVERVIEW

1 800-227-6139

UPDATED NOVEMBER 1, 2015

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Acupuncture	\$40/visit - \$500/person per calendar year		
Ambulance	85% if from point A to a medical facility - reponse fee is not covered		
Chiropractor	\$40/visit - \$500/person per calendar year		
Dental	Dental Fee Guide		2013 (Eff. Nov 1/15)
	Basic - cleaning, check up, fillings, etc.		95%
	Oral Exams & Cleaning every 6 months		every 6 months
	Major - eg. Crowns, Bridges, Implants, Dentures	s, etc.	80%
	*Initial placement clause "must have a least one tooth extracted while on this Plan"		
	Orthodontic - lifetime max of \$2,000/person		50%
	Yearly Max - all dental combined/person *not in	ncluding orthodontics	\$2,500
	*Sealants and preventive resins are not covered expenses		
	*Scaling/Root Planing- 10 units/year		
Disability - Short Term	\$500/week - maximum 26 weeks - CLAIM MUST BE SUBMITTED WITHIN 60 DAYS OF DISABILITY		
Disability - Long Term	\$2,750/month after Short Term Disability Claim is exhausted		
Ear Plugs - Custom Fitted	\$200 once every 2 years - Member only - from last date of service		
Hearing Aids	100% to \$1,000/person per calendar year - Audiologist Report required		
Hospital Room	85% of the Alberta rate for semi-private or private room		
Laser Eye Surgery	\$1,000 lifetime maximum, no vision care for 5 years		
Massage Therapy	\$40/visit - max \$500/person per calendar year		
Orthotics	\$400 every 2 years - from last date of service - doctor referral required		
Osteopath, Naturopath, Podiatrist and Christian Science Practitioner	\$40/visit - \$500/person per calendar year EFFECTIVE FOR EXPENSES INCURRED ON OR AFTER MAY 1/15		
Out of Country Coverage	\$250,000/person per year for Emergency Medical		
	There is a pre-existing clause on this Policy		
Physiotherapy	\$40/visit - \$500/person per calendar year		
Prescription Drugs	paid at 95% (max \$6,000/person per calendar year)		
Diabetic Supplies	covered (at 95%) - excluding the glucometer		
Viagra/Cialis	covered (at 95%) - EFFECTIVE DECEMBER 1, 2013		
Psychologist - Clinical	85% to a maximum of \$450 per calendar year		
Safety Eye Wear	\$100/year - Member only - from last date of service		
Smoking Cessations	95% to a \$1,000/person - lifetime maximum - Champix, Zyban etc. (Nicorette Patch etc. are not covered)		
Vaccines	100% up to \$200/family per 5 years		
Vision - Glasses/Contacts	<u> </u>	DECODIDATION DECLIDE	NAUTH FACH OF AIM
Vision - Glasses/Contacts	\$300 after 2 years	RESCRIPTION REQUIRED	WITH EACH CLAIM
Vision - Glasses/Contacts	•	YE EXAMS ARE NOT CO	
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Dependent Children are covered:

up to 21st birthday

21 - 25th birthday if full time student - proof required